

Department of Public Health  
and Human Services

Section:  
TIME LIMITED ASSISTANCE

TANF CASH ASSISTANCE

Subject:  
At-Risk Interview, Plan and Follow-up

**Supersedes:** TANF 801-2 (01/01/06)

**References:** ARM 37.78.102

**GENERAL RULE**—A household is considered "at-risk" if any adult household member has used 48 or more months of TANF. The at-risk interview/plan/follow-up process is intended to intensify services for these households before their federal 60-month time limit is exhausted. Every household must have an at-risk plan in place by their 49<sup>th</sup> month of TANF.



The goal is to develop a cohesive plan between OPA, WoRC, the participants and any other agency involved with the household. Case history and future strategies should be discussed during the interview. Please document in the S.O.A.P. format outlined later in this section what services have been provided in what states, current status, progress, and goals/plans. In addition, the participants should be fully educated on all options under TANF. If currently employed, they may want to save the TANF clock and only receive FS and MA.

**AT RISK REPORTS** Two TEAMS reports are generated and sent to County Directors to identify households:

1. 18 month Time Clock At-Risk report – lists adults with **exactly** eighteen months of TANF benefits remaining. There is not a requirement to interview participants listed on the eighteen-month at-risk report, but it may be wise to do so.
2. 12 month Time Clock At-Risk report – lists all adults currently open who have used 48 or more months of TANF regardless of if they have an at-risk plan in place or not.

A client may appear on a 12-month list without previously appearing on the 18-month list. Central office (Carol Carpenter) generally e-mails the County Directors and WoRC Monitors to notify them of out-of-state time clock adjustments that causes a the change resulting in 18 or less months remaining.



Central office will create and e-mail a monthly update to County Directors WoRC Monitors, Area Managers, Regional Policy Specialists and central office management, listing those needing an at-risk plan. It is expected that WoRC Montiors will forward the list to WoRC directors as needed.

Section: TIME LIMITED ASSISTANCE

Subject: At-Risk Interview, Plan and Follow-up

The report is intended as a tool to confirm central office records are consistent with that in the counties. The report also includes statistical data on at-risk and extension cases.

### ► AT-RISK INTERVIEW

The first interview is expected within 30 days of receiving the first 12-month Time Clock At-Risk report. Each County Director is expected to **personally** interview each participant as part of a team with the WoRC Case Manager and possibly other entities involved with the household (e.g., Voc. Rehab, mental health, etc.) Each person with a FIA/EP must have their own at-risk plan and at least a part of the interview should be separate from other household members to discuss sensitive areas such as domestic violence, chemical dependency, health concerns and learning disabilities.

**The expectation is that the County will work closely with WoRC to make continued efforts until successful contact is made.**



The WoRC Case Manager should be meeting with most clients weekly. The County Director or designee must coordinate with WoRC to get the at-risk interview/plan completed timely. It is a best practice to schedule the at-risk interview for the same time as the client is being required to sign the employment plan (EP) for the following month. The client should be informed that at the next EP meeting the County Director or designee will be discussing their plan for the remaining TANF months. If the client fails to appear, WoRC will attempt contact by phone or letter the same day as failure to show. If arrangements to complete the employability plan and at-risk plan have not been made within three days of the originally scheduled appointment, the WoRC Case Manager will recommend case closure for no FIA. The closure notice (A607) sent by OPA must state that part of the process in negotiating a FIA/EP for next month is meeting with XXXXX (county director or designee) to create a plan for their remaining months of TANF. If the household fails to comply by the effective date of closure and reapplies, the County Director or designee must meet with them and document their at-risk plan.

Although the WoRC Case Manager is included in the interview, the County Director is ultimately responsible for **documenting the plan on TEAMS case notes** by the 10th of the 49th month. The County Director may delegate entering at-risk case notes on TEAMS but must review them for accuracy and content. When the County Director has entered or approved the TEAMS case note, he or she should e-mail Carol Carpenter in Central Office so statewide statistics can be updated based on the notes entered.

Section: TIME LIMITED ASSISTANCE

Subject: At-Risk Interview, Plan and Follow-up

► **AT-RISK CASE NOTE** **At risk case notes need to be entered in S.O.A.P. format (Subjective, Objective, Assessment, Plan)** All case notes should address the issues of who, what, when, where, why and how. However, an at-risk or extension case note needs to be more detailed. The beginning should state where and when the meeting occurred and who attended. The rest of the data is broken into four parts in S.O.A.P. format.

**NOTE:** General terms regarding physical or mental health issues should be used in system case notes. Details are needed in the hard copy case management notes in the WoRC Case file. See example on last page of this section.

- **S- Subjective-** What the client stated. (Barriers, history of work, education, domestic violence, physical and mental health, what strategies have worked, what would they like to try, what would they do if TANF ended tomorrow, what do they see as their strengths and weaknesses.)
- **O-Objective** – What the Case Managers have observed or have facts of. (Work history, assessments, evaluations, WEX placements, medical verification, SSI application status, sanction history, what has been demonstrated as a strength or weakness.)
- **A – Assessment-** What is happening or could be done. (Do current employment plan activities meet current need, are activities specific, reasonable, achievable and measurable (SRAM), are there additional assessments or evaluations needed, are there adequate supports in place, what changes can be made.)
- **P- Plan-** What is going to be done, including how follow-up will occur. (What are the goals for the remaining time clock, and beyond—3 months, 6 months, 9 months 12 months. What can be done to achieve goals.)

The plan cannot include being approved for extended TANF cash assistance benefits but could include gathering needed medical verifications. If the individual has health barriers and is applying for SSI, the plan should include concurrent paths, one to continue the SSI application process and one directly related to employment as the goal. This acknowledges the possibility of final SSI denial. In such cases employment activities could include but are not limited to focusing on accommodations, coping skills and pain management.

**NOTE:** The plan must be shared with all parties involved in the at-risk interview.

Section: TIME LIMITED ASSISTANCE

Subject: At-Risk Interview, Plan and Follow-up

**► AT-RISK  
FOLLOW-UP**

Anytime a household has significant changes a new plan is recommended. Significant changes could include, but are not limited to, a change in household composition, case transfer to another county or reapplication after significant break in coverage. County Directors should document the amended plan on TEAMS case notes and e-mail Carol Carpenter so statistical reports can be updated. Although it is the primary responsibility of workers to notify their county director of significant changes, if central office or WoRC become aware of such changes, the County Director should be notified via e-mail. County Directors should also review their at-risk cases quarterly to stay abreast of possible extension applications. This monitoring may include regular visits with WoRC staff about progress and possible amendments to the At-Risk Plan.

**MEDICAL  
DOCUMENTATION**

Case notes regarding medical conditions require extra caution due to both HIPAA guidelines and Medicaid regulations. Only the “minimum necessary” information should be included and this would rarely include an actual diagnosis. The documentation in TEAMS case notes should be more generic, e.g. “serious medical condition present, see case file,” or “medical condition present that restricts activities, see case file,” or “mental health issues present, see case file.” Such references alert to the possibility of an extension application being filed and the need for intensified case management and support.

**HIPAA  
COMPLIANCE**

General terms regarding physical and mental health concerns should be used in system case notes. **Details are needed in the hard copy case management notes in the WoRC case file.**

**Example:**

**S:** Client states she doesn't like to leave her house. Being around people makes her uncomfortable so her daughter does the grocery shopping. She denies current use of drugs other than alcohol and tobacco.

**O:** Sanctioned three times for non-compliance, missed appointments without claiming good cause. 17-year-old daughter generally comes with her to the office and helps her with forms.

**A:** Learning needs assessment completed 07/05 (see WoRC file). Refused chemical dependence evaluation. Most current activities require her to leave her home and could be modified until evaluations (Chemical, Physical and Mental) completed. Still resistant to chemical evaluation. Discussed possible long-term medical concerns even from short use.

Section: TIME LIMITED ASSISTANCE

Subject: At-Risk Interview, Plan and Follow-up

**P:** Next three months determine if there are physical or mental health barriers. Refer to primary care physician for routine check up and encouraged discussion of discomfort around people. Complete additional evaluations as needed. Short-term goal is to manage discomfort and increase routine daily living activities outside of her home. Long-term goal is to find a market for her artwork.

Hard copy file would have copy of learning needs assessment and possibly additional objective detail regarding current drug use or mental health concerns. Follow-up at-risk system case note might state, "physical and mental health concern identified, SSI app. filed - See hard copy WoRC file". Then in WoRC file there would be details of mental health diagnosis. Activities would be modified to address both the possible extension concerns (ongoing counseling, medication logs, SSI application, ect.) and employment (research job accommodations, research how to market art work on the internet, take an art class etc.)

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